								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO													
Effective October 1, 2000 09/759/402												02	
CLAIMS AS FILED - PART I (Column 1)						(Column 2)			ENTITY	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS							Г	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	BASIC FEE 355.00		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/6 mir	านร 20=	•			X\$ 9=		OR	X\$18=		
IN	DEPENDENT CI	LAIMS	2 mi	nus 3 =	•			X40=		ОЯ	X80=		
ML	JLTIPLE DEPEN	IDENT CLAIM P	RESENT				+135=		1	1	+270=		
• 11	the difference	in column 1 is	less than zero, enter "0" in column 2			column 2	L	TOTAL 35500		OR OR	TOTAL		
CLAIMS AS AMENDED - PART II									1523 30	1011	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.16	Minus	2	U		4	X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	2	<u> </u>	=	Γ	X40=		QR	X80=		
	I FIRE PRESE	NIATION OF ME	ULTIPLE DE	PENDENI	CLAIM		Γ.	+135=		OR	+270≥		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							 	TOTAL		OR	TOTAL ADDIT. FEE		
01.	· 1.	(Column 1)		(Colur	nn 2)	(Column 3)	AU	OIT. FEE	·		AUUII. FEEI		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	. 16	Minus		14			X\$ 9=		OR	X\$18=		
	Independent	. 3	Minus ,	•••	3	=	7	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDENT	CLAIM	-	\	+135=		OP.	+270=		
							L	TOTAL DIT. FEE		OR	FOTAL ADDIT. FEE		
		مم	DI1. FEE	· 		ADDIT. FEE							
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	;	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	•••		2		X40=	1		X80=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							,,,,,,	 	OR	7.002		
•	lf the entry in males	Ŀ	135=		OR	+270=							
••	If the "Highest Nu	mn 1 is less than th mber Previously Pa	aid For IN THI	S SPACE IS	s less tha	n 20, enter "20."	ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
		mber Previously Pa ber Previously Pai								in col	umn 1.		